# Weekly BDDS Meeting for Case Managers and Providers May 20, 2020

To view captioning for today's meeting, please use the following link link (also available in the chat box)

https://www.streamtext.net/player?event=LUNA



# Welcome and Today's Agenda

- Introductions
- DDRS Goals for COVID-19 Efforts
- Updates and Discussion
- Scenario Review
- Next Steps





### DDRS Goals for COVID-19 Efforts

Help prevent the spread of COVID-19 and keep people alive

Operationalize flexibilities

Provider network maintained

Empower person-centered decision-making for self-advocates, families, case managers, and providers



Image by: McChrystal Group & NASDDDS





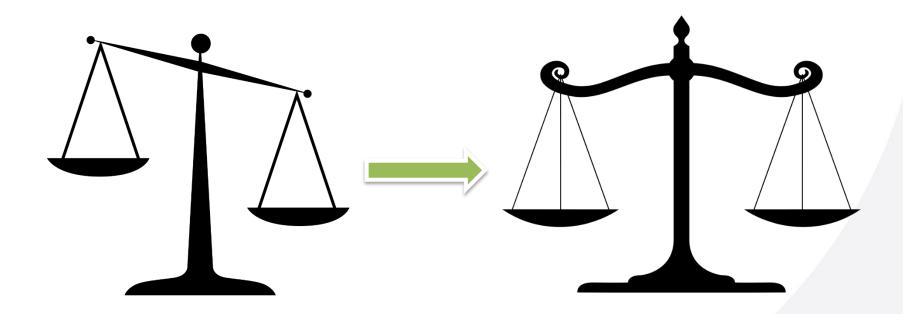
# Updates and Discussion: Adjusting to Get Back on Track

- Guiding Principle/Goal: Empower personcentered decision-making for self-advocates, families, case managers, and providers and individual choice
- How to do this:
  - Avoid Blanket Restrictions
  - Work as a team and with individuals to identify expectations in relation to social distancing and complying with shifting recommendations
  - Continue to be creative in thinking about ways to safely accommodate individual choice



# Adjusting to Get Back on Track: Avoiding Blanket Restrictions

• Important To vs. Important For





# Adjusting to Get Back on Track: Avoiding Blanket Restrictions

#### Visitor Restrictions

- Guiding Principle/Goal: Empower person-centered decision-making for self-advocates, families, case managers, and providers.
- Work with the individual, family, case manager, and other team members to identify whether and to what extent to implement restrictions on visitors and/or activities outside the home based on:
  - What is important *for* the individual
  - What is important <u>to</u> the individual

# Adjusting to Get Back on Track: Avoiding Blanket Restrictions

### Moving Individuals

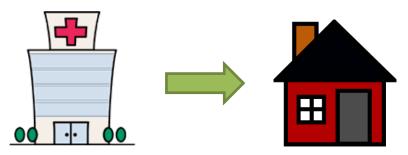
- Guiding Principle/Goal: Empower person-centered decision-making for self-advocates, families, case managers, and providers.
- If a COVID-19 diagnosis may warrant a temporary change in living situation, ISTs should convene in a timely manner before a transition takes place whenever possible.
- IST should consistently consider:
  - What is important <u>for</u> the individual
  - What is important <u>to</u> the individual





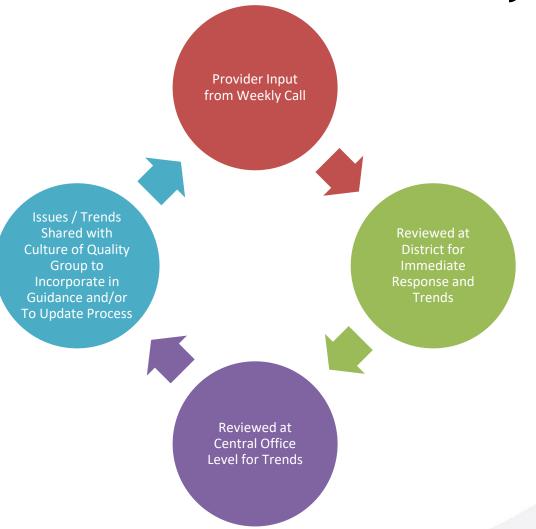
# Adjusting to Get Back on Track: Avoiding Blanket Restrictions

- Returning home after illness
  - Guiding Principle/Goal: Empower person-centered decision-making for self-advocates, families, case managers, and providers.
  - Work with the individual, family, case manager, and other team members to identify any change in needs and how those needs will be addressed when the individual returns to their home with an emphasis on:
    - What is important <u>for</u> the individual <u>AND</u>
    - What is important <u>to</u> the individual





# Connecting the Dots: Provider Weekly Check-In





# The Road to the Good Life Under Construction: Managing the New Normal

#### The Person's Plan









- Each provider determines it's path to re-open\resume face to face services
- Each individual/family determines his\her path with regard to participation level in face to face services
- Person-centered thinking guides the IST's response to "Back on Track"
  - Individual may opt to continue virtual services a little longer after the provider resumes face to face services.
  - Individual may want to return to day services before the provider is ready to resume face to face services. Thus, the IST may explore other face to face service options.



# The Road to the Good Life Under Construction: The Return of Day Programs

As day programs reopen, teams are reminded that:

- Supports should address all facets of life and adjust as the roles & needs of the individual and family members change.
- Individuals and families should have the opportunity to access an array of integrated supports to achieve their vision of a good life
- Individuals/families define their vision of a good life and it is our responsibility as team members to support that vision and provide/find appropriate supports to help them reach that vision.

# The Road to the Good Life Under Construction: The Return of Day Programs

### Guidance & Recommendations Coming Soon:

- General Guidance: outlines Governor's Executive Order & BDDS Guidance
- Provider Considerations: things to consider as providers prepare to reopen day programs
- Case Management Considerations: things to consider when having conversations with individuals/families as they move through the phases of reopening

# The Road to the Good Life Under Construction: Group Visitor / Outside Activity Restrictions

#### **Guiding Principles:**

- recognize and accommodate the wide variety of circumstances experienced by individuals residing in these settings,
- help prevent the spread of COVID-19 and keep people safe, and
- empower person-centered decision-making for selfadvocates, families, case managers, and providers.

#### Guidance & Recommendations Coming Soon:

- Focused on supporting setting-level determinations
- Includes considerations and recommendations for provider implementation of that approach



- Bill, is a 53-year-old man who receives supports through the CIH and lives with two roommates.
- Bill receives RHS hourly, Facility Hab and CHIO.
- Prior to COVID-19 Bill had been attending a day program five days a week and really enjoys his time there.
- Bill also is close to several family members whom he would visit often on the weekends, was active in his church and participated in several programs through the local Special Olympics.
- Since the pandemic Bill has not been able to attend his day program because the day program site temporarily closed.
- In addition Bill has not been able to visit his family on the weekends and all of his Special Olympics activities have been cancelled.

- During the pandemic Bill has been able to receive facility hab via telemedicine and CHIO at home by utilizing the Appendix K flexibilities.
- His day service provider coordinated activities during set hours and participants joined in as a group via Zoom on a daily basis.
- He kept in touch with family via face time with nightly calls and participated in the virtual services offered through his church.
- Bill has stayed in contact with his friends from Special Olympics through phone calls and video chats.
- He is excited to participate in the virtual summer games, especially track and field since he and his CHIO staff have been practicing and staying in shape for it by doing physical activities in the home and neighborhood.

- Bill's day program is set to reopen next month with some restrictions and adjustments to the schedule.
  - The day program will begin by allowing individuals who do not have underlying health conditions and who have not been exposed or ill with COVID-19 to come first on a part time basis.
  - The re-opening plan requires mandatory mask wearing, daily heath assessments, frequent hand washing and social distancing.
  - While the provider has made tentative dates for people to begin returning, they have not committed to full operations for several months.
  - Bill really enjoyed his day program and is eager to do activities outside of the home with his friends and family.
- When notified of the phased in re-opening of day serves, Bill and his team held a team meeting to discuss his potential return and how that would look.
- Looking at Bills specific situation the team identifies what's important to Bill and what's important for Bill during this transition.



- It was noted, that while Bill is eager to return to his day program Bill does not like wearing masks and thus far has refused to wear one.
- The team discussed that being active in his community and maintaining his relationships are important to Bill.
- They also noted that it is important for Bill to wear a mask, to do frequent hand washing and to practice social distancing in his day program as well as when he goes out into the community.
- Bill and his team discuss what Bill's days and activities will look like moving forward and the supports he needs to be successful.
- His case manager leads the team in utilizing the integrated supports star to identify what Bill currently has access to and what other things could potentially be put in place.

### Assisting Bill towards his vision of a good life

#### Personal Strengths and Assets:

Bill has adjusted well to changes that have recently happened. Bill has done a great job at staying connected with his family and friends. He even helped his Aunt learn how to use face time so she could stay in touch with him. Bill has shown great flexibility, especially during these times where his routine/schedule are different. Bill is also very motivated to get back to his activities, friends and family.

#### Relationships:

Bill has a good relationship with his roommates and friends from the day program and Special Olympics. Bill is very close to his family and the team discusses and puts into place ways for Bill to start visiting his family on the weekends to go to church and have Sunday dinner together. The team also discusses ways that Bill can start to visit his friends from Special Olympics to play video games and watch movies at their house with the support of his CHIO staff.

### Assisting Bill towards his vision of a good life

#### Technology:

Bill has really embraced technology and caught on quickly to using Zoom and FaceTime. Bill would like to explore new ways to use this skill. The team discusses other opportunities for Bill to participate in activities using technology. Bill signs up for a local drama group that is offering virtual classes and will use his CHIO staff to assist in learning how to participate in those class and building relationships with other members of the class.

#### Community:

Bill has strong ties to his community and his church. In addition to resuming in person services at the church, Bill would like to volunteer with his church who have established a food pantry for the community due to the economic impact of COVID-19. The team discusses and helps Bill coordinate transportation and support with the pastor's wife who has agreed to support Bill during this volunteer time.

### Assisting Bill towards his vision of a good life

#### Eligibility Specific:

- Bill understands that in order to go back to his day program part time and to participate in church, volunteer and visit his family and friends that he will need to wear a mask and practice staying 6 feet apart.
- Bill has anxiety about wearing a mask and worries that people will get mad at him if he gets to close.
- The team decides to add BMAN services right away so that they can start working to reduce Bill's anxiety and worries by building strategies for Bill to be successful with wearing a mask and responding appropriately to others.
- The case manager continues to follow up with Bill and his team on a weekly basis to see how things are progressing.
- Following the meeting, the case manager updates Bills' PCISP integrating the information discussed from the Integrated Support discussion into the appropriate Life Domains.
- The IST convenes regularly (telephonically or virtually) to discuss Bills progress and address any ongoing needs.

### Assisting Judy towards her vision of a good life

- Judy is a 23-year-old woman who receives supports through the FSW and lives with her Mom.
- Judy's services include case management and PAC.
- Judy's Mom works in a neighboring city Tuesday through Saturday from 10:00 AM 6:00 PM.
- Judy works at the local diner from 1:00 PM 5:00 PM Monday through Friday.
- Judy is a night owl and stays up until 2:00 AM most nights so she sleeps in late each morning.
- Prior to the pandemic, Judy received PAC services Tuesday through Thursday from 11:00 AM - 1:00 PM.
  - PAC staff ensure Judy gets up at 11:00 AM and takes a shower.
  - PAC staff then assist Judy in cooking a well-balanced meal before taking her to work.
  - After work, Judy walks to the local library and spends time on the computer or listening to audio books until her mom picks her up

### Assisting Judy towards her vision of a good life

- Judy is very close to her grandmother who lives about 30 minutes away.
  - Judy's grandmother is 86 years old and no longer able to drive.
  - They talk on the phone every day and Judy spent every Saturday at her grandmother's house while her mom is working.
  - Judy helps her grandmother with light housekeeping but they spend most of the day just talking and enjoying each other's company.
- Judy was laid off from her job at the diner due to the pandemic. This left Judy with more time home alone because her mother continued to work.
- Additionally, Judy did not want PAC staff to come to the home because she was afraid of catching COVID-19.
- Judy is quite independent, so PAC services have been provided via telemedicine.
- This worked well for Judy, as staff would call her phone in the mornings to make sure she got out of bed and into the shower.
- PAC staff would call back after her shower and walk her through putting together a good meal. Judy only felt comfortable using the microwave when no one else was home.
- Judy and PAC staff also developed a schedule so that Judy would have some structure to her day. Her schedule included some housekeeping activities each day, some time for exercise, and some leisure activities that could all be done at home.

### Assisting Judy towards her vision of a good life

- Judy was not able to visit her grandmother in person anymore because of the risk to her grandmother since her mom was still working.
- While Judy adapted to the provision of PAC via telemedicine, she is anxious to re-start in-person support as she has found herself feeling lonely a lot.
- Judy's PAC provider notified her and her mom that they will not be able to provide in-person PAC services for the forseeable future. They will continue the PAC services via telemedicine, however.
- Judy contacted her case manager and asked if she would help look for another PAC provider. The case manager agreed to do so but noted that she did not think there were any PAC providers in the area accepting new referrals.
- The case manager suggested convening an IST meeting to discuss what is important to and important for Judy.

- Judy and her team identified that it is **important to** Judy to have her own money, have time to be around her family and friends and to be busy.
- The team also identified that it is important for Judy to be prompted to complete daily hygiene activities and to have assistance in preparing healthy meals.
- The case manager led the team utilizing the integrated supports star to explore ways for Judy to be supported and not feel so lonely.

#### Personal Strengths and Assets:

Judy is friendly and enjoys spending time with family and friends. She has a strong work ethic and is never late. She likes doing things for others, especially her grandmother. She is proficient with her smart phone and not afraid of using technology. Judy adapts to change as needed and never complains. She is healthy and strong.



#### Relationships:

Judy and her mom are best friends. When they are not working, they spend a lot of time together. Judy is friends with the owners of the local diner and gets along well with all of her co-workers. Judy is very close to her grandmother and enjoys spending time with her. Judy has some friends from high school that she stays connected with through social media. Because Judy goes to the library on a regular basis, she knows the library media staff well. Barbara oversees the media department at the library and she and Judy often talk about Barbara's grandchildren.



#### Technology:

Judy has an iPhone and uses it to make calls, texts, and for social media. She does not have a computer at home but can use the computer at the library. She uses the computer at the library to play games but has not had any training on other uses. The team explore apps that Judy can use to provide reminders that prompt Judy to get showered and dressed for the day. They also work with grandmother to video chat with Judy every day to make sure she has completed those activities and is dressed appropriately for the weather. During these video chats grandmother will also provide Judy with the verbal prompts/supports to heat up her lunch and they will eat lunch together every day while mom works. Mom and Judy will meal prep Judy's lunches every weekend for the week ahead. They will also pick out and lay out clothes in the evenings for the following day.

#### Community:

Judy and her mom have lived in their current home for more than 10 years. Judy is comfortable walking when in town and knows her way around. She does not drive so she is dependent on her mom or staff to take her to town. Judy attends church with her mother and grandmother and would like to resume that activity. The church has opened up services again so Judy and her mom are able to attend but grandmother still is unable to attend due to her age and high risk of exposure to COVID. Instead Judy and her mother bring the grandmother dinner after church and enjoy a meal together while practicing social distancing and wearing a mask. The team also reaches out to Barbara at the library and to inquire about employment or volunteer opportunities at the library. Barbara indicates that they are unable to employ Judy at this time but would love to have her come and volunteer to help with the new sanitation and capacity requirements.

#### **Eligibility Specific:**

The team discussed removing PAC from Judy's plan because through technology and support of grandmother she is able to be supported in ways that PAC was supporting her. They also decide that adding CHIO would be an excellent way to help Judy stay active while at home during this time as well as help her to get out to the community to do some of the activities that she enjoyed before as those activities become more available. CHIO staff would also take her to the library to volunteer and help her adjust to the role of being a volunteer. The team also discussed that Judy would call her employer and see if they have any plans to re-open and when they think she will be able to return to work. Judy expressed that if she does not get to return to working at the diner, she would like to find another job. A referral to VR was discussed as an option if Judy decides to seek other employment.

- The case manager continues to follow up with Judy and her team on a weekly basis to see how things are progressing.
- Following the meeting, the case manager updates Judy's PCISP integrating the information discussed from the Integrated Support discussion into the appropriate Life Domains.
- The IST convenes regularly (telephonically or virtually) to discuss Judy's progress and address any ongoing needs.

## **Next Steps**

- Beginning on June 3<sup>rd</sup>, the BDDS Meeting for Providers & Case Managers will move to an every other week schedule.
- Details on accessing the June 3<sup>rd</sup> meeting will be sent via DDRS Announcements early next week.





BDDS / BQIS Questions:
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